

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

08/92/89

FILING DATE

APPLICANT(S)

M-M Tseng

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
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17						
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19						
20	1					
21		1				
22		2				
23		2				
24		2				
25		1				
26		1				
27	1					
28		1				
29		1				
30		1				
31		2				
32	1					
33		1				
34		1				
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39		1				
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41		1				
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50						
TOTAL IND.	3					
TOTAL DEP.	23					
TOTAL CLAIMS	26					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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